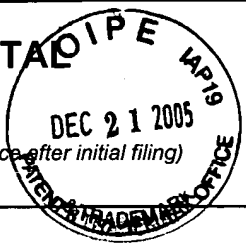


IFW

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/766,104
		Filing Date	January 27, 2004
		First Named Inventor	Woonza M. Rhee
		Art Unit	1618
		Examiner Name	Blessing M. Fubara
Mail Stop	Amendment	Attorney Docket Number	2500-2287.05



ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> No fee due <input type="checkbox"/> Fee(s) due: \$ _____ <input type="checkbox"/> Check enclosed <input type="checkbox"/> Charge Deposit Account No. 18-0580 <input type="checkbox"/> 37 CFR § 1.16 <input type="checkbox"/> 37 CFR § 1.17 <input checked="" type="checkbox"/> The Commission is authorized to charge any underpayment or credit any overpayment to Deposit Account No. 18-0580 <input checked="" type="checkbox"/> Return postcard <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) - _____ <input type="checkbox"/> ___-Month Extension of Time	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Information Disclosure Statement & PTO-1449 Form(s) <input type="checkbox"/> Cited reference copy(ies) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Declaration(s) by Inventor(s) <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Updated Application Data Sheet <input type="checkbox"/> Drawing(s) - ___ Sheets <input type="checkbox"/> Compact Disk(s) - ___ CD(s) <input type="checkbox"/> Petition <input type="checkbox"/> Power of Attorney & Address Indication Form	<input type="checkbox"/> Revocation of & New Power of Attorney, Address Indication Form <input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Other Enclosure(s) (see remarks): Claim Count <table border="1"> <tr> <td>Total Claims</td> <td>68</td> <td>- 68 =</td> <td>0</td> <td>New Claim No.</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>- 2 =</td> <td>0</td> <td></td> <td>0</td> </tr> </table>	Total Claims	68	- 68 =	0	New Claim No.	0	Independent Claims	2	- 2 =	0		0
Total Claims	68	- 68 =	0	New Claim No.	0									
Independent Claims	2	- 2 =	0		0									

REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name (print/type)	Karen Canaan, Reg. No. 42,382 Reed Intellectual Property Law Group	Telephone	(650) 251-7700
Signature		Date	December 16, 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Name (print/type)	Yesenia Garcia	Date	December 16, 2005
Signature			



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Woonza M. Rhee et al.

Confirmation No.: 2188

Serial No.: 10/766,104

Group Art Unit: 1618

Filing Date: January 27, 2004

Examiner: Blessing M. Fubara

Title: METHOD FOR PREVENTING THE FORMATION OF ADHESIONS FOLLOWING
SURGERY OR INJURY

AMENDMENT UNDER 37 C.F.R. § 1.111

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the non-final Office Action mailed on November 10, 2005, please reconsider this application in view of the amendments and remarks set forth in this paper. As this paper is timely filed within the three-month shortened statutory period for response, no fee accompanies this paper.

LISTING OF THE CLAIMS:

The listing of the claims for this application are set forth on pages 2 to 8 of this paper.

REMARKS:

Applicants' comments in support of this application are presented in the remarks set forth on pages 9 to 10 of this paper.